

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket No. (Optional): 820701-1015								
I hereby certify that this correspondence is being filed with the United States Patent and Trademark Office via EFS-Web on the dated indicated below <div style="text-align: center; margin: 10px 0;"> <u>9/4/2007</u> </div> <div style="text-align: center; margin: 10px 0;"> </div> Signature – Laurie Delesandro		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">In re Application of Powers, et al.</td> </tr> <tr> <td style="padding: 2px;">Application Number 10/671,360</td> <td style="padding: 2px;">Filed 09/25/2003</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For Ketoamides Inhibitors in Chronic Nerve Diseases</td> </tr> <tr> <td style="padding: 2px;">Group Art Unit 1654</td> <td style="padding: 2px;">Examiner Bradley, C.</td> </tr> </table>	In re Application of Powers, et al.		Application Number 10/671,360	Filed 09/25/2003	For Ketoamides Inhibitors in Chronic Nerve Diseases		Group Art Unit 1654	Examiner Bradley, C.
In re Application of Powers, et al.										
Application Number 10/671,360	Filed 09/25/2003									
For Ketoamides Inhibitors in Chronic Nerve Diseases										
Group Art Unit 1654	Examiner Bradley, C.									
Applicant hereby appeals to the Board of Patent Appeals and interferences from the last decision of the examiner.										
The fee for this Notice of Appeal is (37 CFR 1.17(b))		\$ 500.00								
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 250.00										
<input type="checkbox"/> A check in the amount of the fee is enclosed.										
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.										
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.										
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 20-0778.										
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.										
Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
I am the										
<input type="checkbox"/> applicant/inventor.										
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b)										
<input checked="" type="checkbox"/> Is enclosed. (Form PTO/SB/96)										
<input checked="" type="checkbox"/> attorney or agent of record.										
<input type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration No. if acting under 37 CFR 1.34(a)										
<div style="text-align: center; margin: 10px 0;"> </div> Todd Deveau, Reg. No. 29,526		<div style="text-align: center; margin: 10px 0;"> <u>6 Sept. 2007</u> </div> Date								
Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.										
<input type="checkbox"/> *Total of _____ forms are submitted.										